

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

ADDRESS (number and street)

2300 REXWOODS DRIVE SUITE 340

☐Check if different  
than previously  
reported. (ACC)

RALEIGH

NC

27607

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00235184

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2007

through

12

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

AMY M. CAVE

Signature of Treasurer

Electronically Filed by AMY M. CAVE

Date

01

18

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		137108.32
(b) Cash on Hand at Beginning of Reporting Period .....	178600.91	
(c) Total Receipts (from Line 19) .....	26122.47	74072.52
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	204723.38	211180.84
7. Total Disbursements (from Line 31) .....	13927.51	20384.97
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	190795.87	190795.87
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	3500.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	23120.00	51255.00
(i) Itemized (use Schedule A) .....	2960.00	22430.00
(ii) Unitemized .....	26080.00	73685.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	0.00	0.00
(b) Political Party Committees .....	0.00	300.00
(c) Other Political Committees (such as PACs) .....	26080.00	73985.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	42.47	87.52
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	26122.47	74072.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	26122.47	74072.52

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	6927.51	7334.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	6927.51	7334.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	850.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4750.00	4750.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	2250.00	7450.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	13927.51	20384.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13927.51	20384.97

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	26080.00	73985.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	26080.00	73985.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6927.51	7334.97
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6927.51	7334.97

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

BRYAN ALLEN

Mailing Address 500 FOREST LANE EXT

City

WALLACE

State

NC

Zip Code

28466

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
APC COMPANY

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.9801

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

BRYAN ALLEN

Mailing Address 500 FOREST LANE EXT

City

WALLACE

State

NC

Zip Code

28466

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
APC COMPANY

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9823

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

BRYAN ALLEN

Mailing Address 500 FOREST LANE EXT

City

WALLACE

State

NC

Zip Code

28466

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
APC COMPANY

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9843

Amount of Each Receipt this Period

10.00

PURCH. HOLE IN ONE SHOT -  
9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

HOLLI APPLGATE

Mailing Address 4 CIRCLE LANE

City

STANFORD

State

IL

Zip Code

61774

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VOSTERMANS VENTILATION

Occupation

CONTROLLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 6 / 2 0 0 7

Transaction ID: SA11AI.9800

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

JOSEPH BARBAN

Mailing Address 10135 VINE COURT

City

THORTON

State

CO

Zip Code

80229

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORT DODGE ANIMAL HEALTH

Occupation

SWINE BUSINESS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.9808

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

RANDY BAREFOOT

Mailing Address 502 FOX LAKE DRIVE

City

CLINTON

State

NC

Zip Code

28328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRESTAGE FARMS

Occupation

DIR DEPT OF LAND, NUTRIENT MGT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

790.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9850

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**SUBTOTAL** of Receipts This Page (optional) .....

1020.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

KENNY BASS

Mailing Address 359 HOUSES MILL ROAD

City

NEWTON GROVE

State

NC

Zip Code

28366-7298

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOG SLAT, INC.

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9851

Amount of Each Receipt this Period

20.00

PURCH. HOLE IN ONE SHOTS -  
9/21/07

**B.**

Full Name (Last, First, Middle Initial)

KENNY BASS

Mailing Address 359 HOUSES MILL ROAD

City

NEWTON GROVE

State

NC

Zip Code

28366-7298

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOG SLAT, INC.

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1420.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9852

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**C.**

Full Name (Last, First, Middle Initial)

KENNY BASS

Mailing Address 359 HOUSES MILL ROAD

City

NEWTON GROVE

State

NC

Zip Code

28366-7298

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOG SLAT, INC.

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3420.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 7

Transaction ID: SA11AI.9931

Amount of Each Receipt this Period

2000.00

GOLF - 9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

2040.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 40

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

KENNY BASS

Mailing Address 359 HOUSES MILL ROAD

City

NEWTON GROVE

State

NC

Zip Code

28366-7298

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOG SLAT, INC.

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3580.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	7

Transaction ID: SA11AI.9933

Amount of Each Receipt this Period

160.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07**B.**

Full Name (Last, First, Middle Initial)

CHRIS BEARD

Mailing Address 1000 NEUSE RIDGE ROAD

City

CLAYTON

State

NC

Zip Code

27520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PFIZER ANIMAL HEALTH

Occupation

SWINE INDUSTRY SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	4	/	2	0	0	7

Transaction ID: SA11AI.9798

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

CHRIS BEARD

Mailing Address 1000 NEUSE RIDGE ROAD

City

CLAYTON

State

NC

Zip Code

27520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PFIZER ANIMAL HEALTH

Occupation

SWINE INDUSTRY SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	1	/	2	0	0	7

Transaction ID: SA11AI.9842

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07

SUBTOTAL of Receipts This Page (optional) .....

700.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)  
CHRIS BEARD

Mailing Address 1000 NEUSE RIDGE ROAD

City State Zip Code  
CLAYTON NC 27520

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PFIZER ANIMAL HEALTH

Occupation  
SWINE INDUSTRY SPECIALIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9848

Amount of Each Receipt this Period

10.00

PURCH. HOLE IN ONE SHOT -  
9/21/07

**B.**

Full Name (Last, First, Middle Initial)  
NORB BORCHERDING

Mailing Address 21266 COUNTRY SQUARE LANE

City State Zip Code  
DUBUQUE IA 52001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DOUBLE L GROUP LTD.

Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9846

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07

**C.**

Full Name (Last, First, Middle Initial)  
NORB BORCHERDING

Mailing Address 21266 COUNTRY SQUARE LANE

City State Zip Code  
DUBUQUE IA 52001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DOUBLE L GROUP LTD.

Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9847

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**SUBTOTAL** of Receipts This Page (optional) .....

70.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

JOEL BRITT

Mailing Address 3070 DOBBERSVILLE ROAD

City

MOUNT OLIVE

State

NC

Zip Code

28365

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAPE FEAR FARM CREDIT

Occupation

VP/RELATIONSHIP MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9822

Amount of Each Receipt this Period

250.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

DWIGHT BUCK

Mailing Address 1603 WHITEHALL DRIVE

City

KINSTON

State

NC

Zip Code

28501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IOWA VET

Occupation

SALESPERSON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.9794

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

DWIGHT BUCK

Mailing Address 1603 WHITEHALL DRIVE

City

KINSTON

State

NC

Zip Code

28501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IOWA VET

Occupation

SALESPERSON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9820

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

790.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)  
ELLEN CANNADY

Mailing Address P.O. BOX 642

City State Zip Code  
BEULAVILLE NC 28518

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MURPHY FAMILY VENTURES,  
LLC

Occupation  
ANALYST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9844

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)  
WILLIAM CHERRY, JR.

Mailing Address 3305 OLD SAYBROOK COURT

City State Zip Code  
RALEIGH NC 27612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
POYNER & SPRUILL

Occupation  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 7 / 2 0 0 7

Transaction ID: SA11AI.9802

Amount of Each Receipt this Period

1000.00

GOLF - 9/21/07

**C.**

Full Name (Last, First, Middle Initial)  
HENRY E FAISON

Mailing Address 302 LAKE DRIVE

City State Zip Code  
CLINTON NC 28328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FAISON INVESTMENTS INC.

Occupation  
INVESTMENT ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9864

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**SUBTOTAL** of Receipts This Page (optional) .....

1520.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 40

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

WESLEY HAIRR

Mailing Address 174 WASHINGTON CIRCLE

City

WALLACE

State

NC

Zip Code

28466

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HAIRR FARMS

Occupation

HOG FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	0	7

Transaction ID: SA11AI.9841

Amount of Each Receipt this Period

100.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

DAVID D. HERRING

Mailing Address 504 KEITH HILLS RD.

City

LILLINGTON

State

NC

Zip Code

27546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOG SLAT, INC.

Occupation

VP OF MARKETING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	0	7

Transaction ID: SA11AI.9835

Amount of Each Receipt this Period

1500.00

GOLF - 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

DAVID D. HERRING

Mailing Address 504 KEITH HILLS RD.

City

LILLINGTON

State

NC

Zip Code

27546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOG SLAT, INC.

Occupation

VP OF MARKETING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	0	7

Transaction ID: SA11AI.9836

Amount of Each Receipt this Period

280.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07

SUBTOTAL of Receipts This Page (optional) .....

1880.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

DAVID D. HERRING

Mailing Address 504 KEITH HILLS RD.

City

LILLINGTON

State

NC

Zip Code

27546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOG SLAT, INC.

Occupation

VP OF MARKETING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3620.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9873

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**B.**

Full Name (Last, First, Middle Initial)

LISA HERRING

Mailing Address 504 KEITH HILLS ROAD

City

LILLINGTON

State

NC

Zip Code

27546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TDM FARMS

Occupation

OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9837

Amount of Each Receipt this Period

2000.00

GOLF - 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

DAVID HULBERT

Mailing Address 810 WOOD COVE ROAD

City

WILMINGTON

State

NC

Zip Code

28409

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DM FARMS OF ROSE HILL, LLC

Occupation

SWINE PRODUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9824

Amount of Each Receipt this Period

100.00

GOLF - 9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

2120.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

R C HUNT

Mailing Address 823 CARDINAL DRIVE

City

WILSON

State

NC

Zip Code

27896

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ANDREWS HUNT FARMS

Occupation

PRESIDENT/CO-OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

935.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9831

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

R C HUNT

Mailing Address 823 CARDINAL DRIVE

City

WILSON

State

NC

Zip Code

27896

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ANDREWS HUNT FARMS

Occupation

PRESIDENT/CO-OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9832

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

R C HUNT

Mailing Address 823 CARDINAL DRIVE

City

WILSON

State

NC

Zip Code

27896

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ANDREWS HUNT FARMS

Occupation

PRESIDENT/CO-OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

995.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9870

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**SUBTOTAL** of Receipts This Page (optional) .....

560.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

RONALD V JACKSON

Mailing Address 105 INVERNESS RD

City

CLINTON

State

NC

Zip Code

28328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CLINTON TRUCK & TRACTOR  
CO INC

Occupation

PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.9792

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

RONALD V JACKSON

Mailing Address 105 INVERNESS RD

City

CLINTON

State

NC

Zip Code

28328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CLINTON TRUCK & TRACTOR  
CO INC

Occupation

PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9875

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

RONALD V JACKSON

Mailing Address 105 INVERNESS RD

City

CLINTON

State

NC

Zip Code

28328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CLINTON TRUCK & TRACTOR  
CO INC

Occupation

PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9876

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**SUBTOTAL** of Receipts This Page (optional) .....

560.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

PAUL KNOERNSCHILD

Mailing Address 5536 SOUTH HWY 94

City

AUGUSTA

State

MT

Zip Code

63332

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORT DODGE ANIMAL HEALTH

Occupation

TECH SERVICES VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.9806

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

PAUL KNOERNSCHILD

Mailing Address 5536 SOUTH HWY 94

City

AUGUSTA

State

MT

Zip Code

63332

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORT DODGE ANIMAL HEALTH

Occupation

TECH SERVICES VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9812

Amount of Each Receipt this Period

80.00

PURCH. CIRCLE SHOTS - 9/2-1/07

**C.**

Full Name (Last, First, Middle Initial)

PAUL KNOERNSCHILD

Mailing Address 5536 SOUTH HWY 94

City

AUGUSTA

State

MT

Zip Code

63332

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORT DODGE ANIMAL HEALTH

Occupation

TECH SERVICES VETERINARIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9877

Amount of Each Receipt this Period

40.00

PURCH. HOLE IN ONE SHOTS - 9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

620.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

DOUG MACKLIN

Mailing Address 1905 RIDGE OAKS COURT

City State Zip Code  
 OAK RIDGE NC 27310

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KEMIN

Occupation  
SALESPERSON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 1 5 / 2 0 0 7

Transaction ID: SA11AI.9793

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

DOUG MACKLIN

Mailing Address 1905 RIDGE OAKS COURT

City State Zip Code  
 OAK RIDGE NC 27310

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KEMIN

Occupation  
SALESPERSON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9882

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
 - 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

DOUG MACKLIN

Mailing Address 1905 RIDGE OAKS COURT

City State Zip Code  
 OAK RIDGE NC 27310

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
KEMIN

Occupation  
SALESPERSON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9883

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
 /07

**SUBTOTAL** of Receipts This Page (optional) .....

560.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

ZACK MCCULLEN III

Mailing Address PO BOX 438

City

CLINTON

State

NC

Zip Code

28328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRESTAGE FARMS

Occupation

VP OF SWINE PRODUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9879

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**B.**

Full Name (Last, First, Middle Initial)

STEVE METCALF

Mailing Address P.O. BOX 1694

City

ASHEVILLE

State

NC

Zip Code

28802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE POLICY GROUP, INC.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9834

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

BURL MOODY

Mailing Address 2244 EMORY LANE

City

NORMAL

State

IL

Zip Code

61761

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VOSTERMANS VENTILATION

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.9804

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

1020.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

BURL MOODY

Mailing Address 2244 EMORY LANE

City

NORMAL

State

IL

Zip Code

61761

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VOSTERMANS VENTILATION

Occupation  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9888

Amount of Each Receipt this Period

40.00

PURCH. MULLIGAN/RED TEES -  
9/21/07

**B.**

Full Name (Last, First, Middle Initial)

STEVE MUIRHEAD

Mailing Address 2102 CHELSEA DRIVE

City

WILSON

State

NC

Zip Code

27893

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARGILL

Occupation  
BRANCH SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9878

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**C.**

Full Name (Last, First, Middle Initial)

HARRY MURPHY

Mailing Address 5185 S. NC 41 HWY

City

WALLACE

State

NC

Zip Code

28466

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
QUARTER M RANCH

Occupation  
ADMINISTRATION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9829

Amount of Each Receipt this Period

1000.00

GOLF - 9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

1060.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

WENDELL MURPHY

Mailing Address 390 BETHOLITE ROAD

City

ROSE HILL

State

NC

Zip Code

28458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MURPHY FAMILY VENTURES,  
LLC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9833

Amount of Each Receipt this Period

1000.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

WENDELL MURPHY JR.

Mailing Address PO BOX 1076

City

ROSE HILL

State

NC

Zip Code

28458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DM FARMS OF ROSE HILL, LLC

Occupation

SWINE PRODUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9880

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

WENDELL MURPHY JR.

Mailing Address PO BOX 1076

City

ROSE HILL

State

NC

Zip Code

28458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DM FARMS OF ROSE HILL, LLC

Occupation

SWINE PRODUCTION

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9881

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**SUBTOTAL** of Receipts This Page (optional) .....

1060.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL J NASH

Mailing Address 30330 SYCAMORE AVE

City

SEDLEY

State

VA

Zip Code

23878

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOUTHERN STATES

Occupation

SWINE ACCOUNT MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.9809

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

GARLAND PARKER

Mailing Address 735 CARLTON ST

City

CLAYTON

State

NC

Zip Code

27520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORT DODGE ANIMAL HEALTH

Occupation

TERRITORY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.9807

Amount of Each Receipt this Period

300.00

GOLF - 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

GARLAND PARKER

Mailing Address 735 CARLTON ST

City

CLAYTON

State

NC

Zip Code

27520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORT DODGE ANIMAL HEALTH

Occupation

TERRITORY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

880.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9893

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

840.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

JOHN PRESTAGE

Mailing Address 305 EAST ARROWHEAD DRIVE

City

CLINTON

State

NC

Zip Code

28328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRESTAGE FARMS

Occupation

SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9825

Amount of Each Receipt this Period

200.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)

JOHN PRESTAGE

Mailing Address 305 EAST ARROWHEAD DRIVE

City

CLINTON

State

NC

Zip Code

28328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRESTAGE FARMS

Occupation

SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9891

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**C.**

Full Name (Last, First, Middle Initial)

NEAL PRICE

Mailing Address 3634 BIG OAK ROAD

City

KINSTON

State

NC

Zip Code

28504

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ANIMAL SCIENCE PRODUCTS,  
INC.

Occupation

TERRITORY MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9814

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

720.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

DAVID PURDIE

Mailing Address 101 CONIFER COURT

City

CLINTON

State

NC

Zip Code

28328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AGCAREERS.COM

Occupation

EASTERN ACCOUNTS SALES MGR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 7

Transaction ID: SA11AI.9805

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

C. SCOTT REMINGTON

Mailing Address PO BOX 7449

City

OMAHA

State

NE

Zip Code

68107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CSR, LTD.

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.9791

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

JOHN SOPPE

Mailing Address 1942 HONEY CREEK ROAD

City

MANCHESTER

State

IA

Zip Code

52057

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOPPE SYSTEMS

Occupation

PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

940.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.9797

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

JOHN SOPPE

Mailing Address 1942 HONEY CREEK ROAD

City

MANCHESTER

State

IA

Zip Code

52057

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOPPE SYSTEMS

Occupation

PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9902

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

JOHN SOPPE

Mailing Address 1942 HONEY CREEK ROAD

City

MANCHESTER

State

IA

Zip Code

52057

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOPPE SYSTEMS

Occupation

PRESIDENT/OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9903

Amount of Each Receipt this Period

10.00

PURCH. HOLE IN ONE SHOT -  
9/21/07

**C.**

Full Name (Last, First, Middle Initial)

RAY SUMMERLIN

Mailing Address 1640 CHRISTMAS TREE RD.

City

DUNN

State

NC

Zip Code

28334

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MURPHY BROWN, LLC

Occupation

PRODUCTION DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9900

Amount of Each Receipt this Period

30.00

PURCH. HOLE IN ONE SHOTS -  
9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

80.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

RAY SUMMERLIN

Mailing Address 1640 CHRISTMAS TREE RD.

City

DUNN

State

NC

Zip Code

28334

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MURPHY BROWN, LLC

Occupation

PRODUCTION DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9934

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**B.**

Full Name (Last, First, Middle Initial)

J. DAVID SUTTON

Mailing Address 1043 PENNY BRANCH ROAD

City

WARSAW

State

NC

Zip Code

28398

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAPE FEAR FARM CREDIT

Occupation

LOAN OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9821

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

J. DAVID SUTTON

Mailing Address 1043 PENNY BRANCH ROAD

City

WARSAW

State

NC

Zip Code

28398

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAPE FEAR FARM CREDIT

Occupation

LOAN OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9901

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

560.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

TERRY TATE

Mailing Address 1018 WAYCROSS ROAD

City

TURKEY

State

NC

Zip Code

28393

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MURPHY FAMILY VENTURES

Occupation

PRODUCTION DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.9790

Amount of Each Receipt this Period

50.00

GOLF - 5/10/07

**B.**

Full Name (Last, First, Middle Initial)

TERRY TATE

Mailing Address 1018 WAYCROSS ROAD

City

TURKEY

State

NC

Zip Code

28393

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MURPHY FAMILY VENTURES

Occupation

PRODUCTION DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9907

Amount of Each Receipt this Period

40.00

PURCH. HOLE IN ONE SHOTS -  
9/21/07

**C.**

Full Name (Last, First, Middle Initial)

TERRY TATE

Mailing Address 1018 WAYCROSS ROAD

City

TURKEY

State

NC

Zip Code

28393

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MURPHY FAMILY VENTURES

Occupation

PRODUCTION DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9908

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**SUBTOTAL** of Receipts This Page (optional) .....

110.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 40

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

DARYL THEIS

Mailing Address 1221 UNIVERSITY COURT, #001

City

RALEIGH

State

NC

Zip Code

27606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ELANCO ANIMAL HEALTH

Occupation

SALES REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1380.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	0	7

Transaction ID: SA11AI.9796

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

DARYL THEIS

Mailing Address 1221 UNIVERSITY COURT, #001

City

RALEIGH

State

NC

Zip Code

27606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ELANCO ANIMAL HEALTH

Occupation

SALES REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1420.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	0	7

Transaction ID: SA11AI.9909

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07**C.**

Full Name (Last, First, Middle Initial)

DARYL THEIS

Mailing Address 1221 UNIVERSITY COURT, #001

City

RALEIGH

State

NC

Zip Code

27606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ELANCO ANIMAL HEALTH

Occupation

SALES REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1460.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	0	7

Transaction ID: SA11AI.9935

Amount of Each Receipt this Period

40.00

PURCH. CIRCLE SHOTS - 9/2-  
1/07

SUBTOTAL of Receipts This Page (optional) .....

580.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)  
HOPE TURNBULL

Mailing Address P.O. BOX 475

City State Zip Code  
WALLACE NC 28466

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MURPHY FAMILY VENTURES,  
LLC

Occupation  
CONTROLLER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9828

Amount of Each Receipt this Period

100.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)  
SANTIAGO VAZQUEZ

Mailing Address 3936 BRINKMAN DRIVE

City State Zip Code  
WILMINGTON NC 28405

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SOUTHERN CROSS FARMS, INC.

Occupation  
FARM MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9815

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**C.**

Full Name (Last, First, Middle Initial)  
BRUCE F. WARREN

Mailing Address 214 KINGSTON CIRLCE

City State Zip Code  
GOLDSBORO NC 27530

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HOG SLAT, INC.

Occupation  
SERVICE MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9816

Amount of Each Receipt this Period

80.00

PURCH. CIRCLE SHOTS - 9/2-1/07

**SUBTOTAL** of Receipts This Page (optional) .....

680.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

BRIAN WOLF

Mailing Address P.O. BOX 1716

City

GOLDSBORO

State

NC

Zip Code

27533

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BBZ MARKETING GROUP

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.9799

Amount of Each Receipt this Period

1300.00

GOLF - 9/21/07

**B.**

Full Name (Last, First, Middle Initial)

BRIAN WOLF

Mailing Address P.O. BOX 1716

City

GOLDSBORO

State

NC

Zip Code

27533

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BBZ MARKETING GROUP

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9914

Amount of Each Receipt this Period

10.00

PURCH. HOLE IN ONE SHOT -  
9/21/07

**C.**

Full Name (Last, First, Middle Initial)

BRIAN WOLF

Mailing Address P.O. BOX 1716

City

GOLDSBORO

State

NC

Zip Code

27533

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BBZ MARKETING GROUP

Occupation

SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9915

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

BRIAN WOLF

Mailing Address P.O. BOX 1716

City

GOLDSBORO

State

NC

Zip Code

27533

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BBZ MARKETING GROUP

Occupation  
SALES

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1470.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9916

Amount of Each Receipt this Period

20.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**B.**

Full Name (Last, First, Middle Initial)

BRIAN WOOD

Mailing Address 268 FAISON MCGOWAN RD

City

KENANSVILLE

State

NC

Zip Code

28349

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IOWA VET SUPPLY CO.

Occupation  
LOCATION MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.9795

Amount of Each Receipt this Period

500.00

GOLF - 9/21/07

**C.**

Full Name (Last, First, Middle Initial)

BRIAN WOOD

Mailing Address 268 FAISON MCGOWAN RD

City

KENANSVILLE

State

NC

Zip Code

28349

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IOWA VET SUPPLY CO.

Occupation  
LOCATION MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9910

Amount of Each Receipt this Period

40.00

PURCH. MULLIGANS/RED TEES  
- 9/21/07

**SUBTOTAL** of Receipts This Page (optional) .....

560.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 40

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

BRIAN WOOD

Mailing Address 268 FAISON MCGOWAN RD

City

KENANSVILLE

State

NC

Zip Code

28349

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IOWA VET SUPPLY CO.

Occupation

LOCATION MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9911

Amount of Each Receipt this Period

10.00

PURCH. CIRCLE SHOT - 9/21-  
/07

**SUBTOTAL** of Receipts This Page (optional) .....

10.00

**TOTAL** This Period (last page this line number only) .....

23120.00



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

<b>A.</b> Full Name (Last, First, Middle Initial) BRANCH BANK & TRUST	<b>Transaction ID:</b> SB21B.9788 <b>Date of Disbursement</b>
Mailing Address MAIN, 200 EAST CHATHAM STREET	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 7</div> </div>
City CARY State NC Zip Code 27511-0670	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CREDIT CARD FEES	<div> <div></div> <div>382.31</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) NC PORK COUNCIL INC	<b>Transaction ID:</b> SB21B.9783 <b>Date of Disbursement</b>
Mailing Address 2300 REXWOODS DRIVE SUITE 340	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 4 / 2 0 0 7</div> </div>
City RALEIGH State NC Zip Code 27607	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement APPLIED 1/3 RULE ON SPRING FUNDRAISERS	<div> <div></div> <div>2254.98</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) NC PORK COUNCIL INC	<b>Transaction ID:</b> SB21B.9938 <b>Date of Disbursement</b>
Mailing Address 2300 REXWOODS DRIVE SUITE 340	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 6 / 2 0 0 7</div> </div>
City RALEIGH State NC Zip Code 27607	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement APPLIED 1/3 RULE ON FALL FUNDRAISER	<div> <div></div> <div>3890.22</div> </div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**6527.51**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 40

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

A.

Full Name (Last, First, Middle Initial)

CAPTAIN JEFF ROSS

Mailing Address 3102 S. OCEAN VIEW CT.

City  
NAGS HEAD

State  
NC

Zip Code  
27959

Purpose of Disbursement  
DEPOSIT-FISHING TRIP DONATED TO AUCTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.9786

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional) .....

400.00

TOTAL This Period (last page this line number only) .....

6927.51

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 / 40

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.** Full Name (Last, First, Middle Initial)  
COM.TO ELECT BOB ETHERIDGE

Mailing Address PO BOX 1059

City LILLINGTON State NC Zip Code 27546

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 02

Transaction ID: SB23.9781

Date of Disbursement

M M / D D / Y Y Y Y  
0 7 / 1 8 / 2 0 0 7

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
COM.TO ELECT BRAD MILLER

Mailing Address PO BOX 10322

City RALEIGH State NC Zip Code 27605

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 13

Transaction ID: SB23.9939

Date of Disbursement

M M / D D / Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

Amount of Each Disbursement this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
COM.TO ELECT SAXBY CHAMBLISS

Mailing Address 416 RUSSELL SENATE BUILDING

City WASHINGTON State DC Zip Code 20510

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 00

Transaction ID: SB23.9778

Date of Disbursement

M M / D D / Y Y Y Y  
0 9 / 1 8 / 2 0 0 7

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

1750.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 40

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

A.

Full Name (Last, First, Middle Initial)

DOLE/HAYES COMMITTEE

Mailing Address 709 HILLSBOROUGH STREET

City  
RALEIGH

State  
NC

Zip Code  
27603

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: NC

District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.9779

Date of Disbursement

11 / 02 / 2007

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

4750.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 40

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

<b>A.</b> Full Name (Last, First, Middle Initial) COM.TO ELECT BRUCE GOFORTH	<b>Transaction ID:</b> SB29.9782 <b>Date of Disbursement</b>																				
Mailing Address 137 STONECREST DRIVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	3		2	0	0	7												
City ASHEVILLE State NC Zip Code 28803	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONTRIBUTION	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																			
500.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) COM.TO ELECT HARRY BROWN	<b>Transaction ID:</b> SB29.9777 <b>Date of Disbursement</b>																				
Mailing Address 2223 N. MARINE BLVD.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	1		2	0	0	7												
City JACKSONVILLE State NC Zip Code 28546	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONTRIBUTION	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) COM.TO ELECT LARRY SHAW	<b>Transaction ID:</b> SB29.9936 <b>Date of Disbursement</b>																				
Mailing Address 1528 NICKLAUS DRIVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	8		2	0	0	7												
City FAYETTEVILLE State NC Zip Code 28303	Amount of Each Disbursement this Period																				
Purpose of Disbursement CHECK UNCASHED - VOID CHECK #2661	<table border="1"> <tr> <td>-500.00</td> </tr> </table>	-500.00																			
-500.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 21	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 40

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

<b>A.</b> Full Name (Last, First, Middle Initial) COM.TO ELECT ROBERT GRADY	<b>Transaction ID:</b> SB29.9929 <b>Date of Disbursement</b>																				
Mailing Address 107 JEAN CIRCLE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	7		2	0	0	7												
City JACKSONVILLE State NC Zip Code 28540	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CONTRIBUTION	<table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00																			
250.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) COM.TO ELECT RUSSELL TUCKER	<b>Transaction ID:</b> SB29.9930 <b>Date of Disbursement</b>																				
Mailing Address 464 NORTH NC HWY 11	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	7		2	0	0	7												
City PINK HILL State NC Zip Code 28572	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CONTRIBUTION	<table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) COM.TO ELECT WALTER G CHURCH	<b>Transaction ID:</b> SB29.9937 <b>Date of Disbursement</b>																				
Mailing Address 5253 MINERAL SPRINGS MOUNTAIN AVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	8		2	0	0	7												
City VALDESE State NC Zip Code 28690	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement CHECK UNCASHED - VOID CHECK #2575	<table border="1"> <tr> <td>-250.00</td> </tr> </table>	-250.00																			
-250.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 86	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 40

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.**

Full Name (Last, First, Middle Initial)

NC HOUSE DEMOCRATIC COMMITTEE

Mailing Address 220 HILLSBOROUGH STREET

City State Zip Code  
RALEIGH NC 27603

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.9784

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

NC HOUSE REPUBLICAN MAJORITY FUND

Mailing Address 1506 HILLSBOROUGH STREET

City State Zip Code  
RALEIGH NC 27605

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.9785

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

2250.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 40 / 40

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

NORTH CAROLINA PORK COUNCIL PAC (NCP PAC) FKA N C PORK PRODUCERS ASSOC IN PAC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
NATIONAL PORK PRODUCERS COUNCIL PORK PACNature of Debt (Purpose):  
PAC AUCTION - 11/29/07

Mailing Address PO BOX 10383

City State ZIP Code  
DES MOINES IA 50306

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.9940

Amount Incurred This Period

3500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

3500.00

2) **TOTALS** This Period (last page this line number only)..... ▶

3500.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

3500.00